

**MAINE DEPARTMENT OF TRANSPORTATION  
BUREAU OF MAINTENANCE AND OPERATIONS  
FLEET SERVICES**

Applicants for Heavy Vehicle & Equipment Technicians, Field Heavy Vehicle & Equipment Technicians, or Heavy Vehicle & Equipment Supervisors read and follow instructions for part A; applicants for other positions read and follow instructions for part B.

Application No. \_\_\_\_\_  
Applicant's Full Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_

**PART A**      Heavy Vehicle & Field Heavy Vehicle Equipment Technicians or Equipment Supervisors only

List in reverse order starting with the most recent, all experience that is directly related to the Technician's position for which you have applied. Unrelated experience will not be considered. Provide as much information as possible. The information must include but not be limited to:

- 1) Type of equipment (such as a car; pickup; light, medium and/or heavy duty truck; trailers and construction equipment).
- 2) Type of work performed (such as engine, transmission or rear end repair or rebuild, hydraulic system repair, welding, front end work, suspension work, body and painting, electrical, air brakes, diesel engines, etc.).
- 3) How many years experience with this type of equipment and repairs.
- 4) You should include the name, address and phone number where the experience was gained.

Additional sheets may be used if necessary. The information provided will be verified by Fleet Services.

**PART B**      All others

Listing in reverse order starting with the most recent, all experience that is directly related to the position for which you have applied and as described in the job posting. Unrelated experience will not be considered. Provide as much information as possible. The information must include but not be limited to:

- 1) Type of related experience.
- 2) Explanation of similar work you have performed.
- 3) How many years of related experience or similar work you have performed.
- 4) Where was this experience obtained (military, vocational school, employer). You should include the name, address and phone number where the experience was gained.

Additional sheets may be used if necessary. The information provided will be verified by Fleet Services.

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BUREAU OF MAINTENANCE AND OPERATIONS  
FLEET SERVICES  
AUGUSTA, MAINE**

EMPLOYER #1      NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

[illegible]

EMPLOYER #2      NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

[illegible]